

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 447272 (6)

1. Corporation Name

~~ANDRAS ENGINEERING & CONSTRUCTION, INC.~~

MARCOBAY CONSTRUCTION, INC.



Principal Place of Business

2115 CRYSTAL GROVE DR.
LAKELAND FL 33801

Mailing Address

2115 CRYSTAL GROVE DR.
LAKELAND FL 33801

3. Date Incorporated or Qualified
03/05/1974

3a. Date of Last Report
03/10/1995

2. Principal Place of Business

2a. Mailing Address

21 306 E. Main Street

26 306 E. Main Street

4. FEI Number
59-1509590

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 201

27 Suite 201

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

23 Lakeland, Florida

28 Lakeland, Florida

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 33801

25 USA

29 33801

30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BAYLESS, HOWARD
ANDRAS ENGINEERING & CONSTRUCTION, INC.
2115 CRYSTAL GROVE DR.
LAKELAND FL 33801

81 Name
BAYLESS, HOWARD

82 Street Address (P.O. Box Number is Not Acceptable)
306 E. Main Street Suite 201

83

84 City
Lakeland FL 85 Zip Code
33801

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VDS
COWPERTHWAIT, STEVE
4566 SAILBREEZE CT
ORLANDO FL

☐ DELETE

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BAYLESS, HOWARD
925 WEDGEWOOD LN
LAKELAND FL

☐ DELETE

2. TITLE
2. NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VDT
PHILLIPS, MARK
1055 ROLLINGWOODS LANE
LAKELAND FL

☐ DELETE

3. TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

4. TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5. TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6. TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOWARD BAYLESS

4.590

(941) 680-2293

Date

Daytime Phone #

CR2E034 (12/95)